40573

(II)

0

Only

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAIL CENTER

2010 MAY 27 AM 8: 30

(Revised 02/2009)

FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Fairenthol ADDRESS (number and street) (Check if address is changed) CITY ZIP CODE STATE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) Ellectibiliarkiecbiliarkie Com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) a ke ocom (Check if address is changed) FEC IDENTIFICATION NUMBER IS THIS STATEMENT OR AMENDED (A) NEW (N) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Wara Type or Print Name of Treasurer Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use

Toll Free 800-424-9530

Local 202-694-1100